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Bib Data Sheet

CONFIRMATION NO. 9496

SERIAL NUMBER 09/732,241	FILING DATE 12/07/2000 RULE	CLASS 514	GROUP ART UNIT 1614	ATTORNEY DOCKET NO. 1343.011US1
APPLICANTS Mathai Mammen, San Mateo, CA; David Oare, Belmont, CA;				
** CONTINUING DATA ***** THIS APPLICATION IS A CIP OF 09/456,170 12/07/1999 ABN				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 01/18/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY CA	SHEETS DRAWING	TOTAL CLAIMS 52
				INDEPENDENT CLAIMS 3
ADDRESS 21186				
TITLE Therapeutic carbamates				
FILING FEE RECEIVED 1095	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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CONFIRMATION NO. 9496

SERIAL NUMBER 09/732,241	FILING DATE 12/07/2000 RULE	CLASS 546	GROUP ART UNIT 1625	ATTORNEY DOCKET NO. 1343.011US1	
APPLICANTS Mathai Mammen, San Mateo, CA; David Oare, Belmont, CA;					
** CONTINUING DATA ***** This application is a CIP of 09/456,170 12/07/1999 ABN					
** FOREIGN APPLICATIONS *****					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 01/18/2001					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged		STATE OR COUNTRY CA	SHEETS DRAWING 0	TOTAL CLAIMS 52	INDEPENDENT CLAIMS 3
ADDRESS 27038					
TITLE Therapeutic carbamates					
FILING FEE RECEIVED 1095	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		